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February 27, 2003

## FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY		
AFTER FINAL TC1700	703-872-9311	U.S. Patent Office		
Ex. J. Rhee Group -Art Unit 1772		Washington, DC		
Kristin L. Johnson		23		
FROM		PAGES (WITH COVER)		
8493		I4060/205649		
REFERENCE NO .		CLIENT/MATTER NO.		

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### COMMENTS

Please acknowledge receipt of the enclosed:

- 1) Transmittal Form PTO/\$B/21
- 2) Fee Transmittal no fee due
- 3) Amendment and Response to Office Action including Marked-up copy of amended claims pursuant to 37 C.F.R. 1.121(c)

For:

Applicant(s): Daniel et al.

Title: Orthogonally Ambiguous Carpet Tile

Serial No.: 09/783,354

Filing Date: February 14, 2001

Attorney Docket No. IRC293 14060/205649

i	
TRANSMISSION RECEIPT DATE/TIME:	
COMPLETED BY:	TOB CODE

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FEB 2 8 2003 PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

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CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this Response to Office Action and all documents referred to as enclosed are being facsimite transmitted to: U.S. Patent and Trademark Office on February 27, 2003, AFTER FINAL, fax no. 703-872-9311 at TC1700 (ART UNIT 1772).

2003

Colleen Kadian

Signature

Date

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		Complete if Known							
FEE TRANSMITTAL		Application Number 09/783,354							
for FY 2002		Filing Date		Fabruary 14, 2004					
Patent tees are subject to annual revision.		First Named Inventor		Daniel, et al.  Jane Rhee					
		Examiner Name		Jane Rhee		0			
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TOTAL AMOUNT OF PAYMENT (\$) 0	Attorney Docket No.			IRC293 14060/205649					
METHOD OF PAYMENT (check all that apply)				FEE C	ALCULATION (continued)				
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Account 11-0855 Number	127	50	221	EU	or cover sheet				
_	139	130	139	130	Non-English specification				
Deposit Account KILPATRICK STOCKTON LLP	147	2,520 920°	147 112	2,520 920*	For filing a request for reexamination Requesting publication of SIR prior to				
Name	'''	620	112	***	Examiner action				
The Commissioner is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action				
I M Chara any additional leafs) during the pendency of this application	115	110	215	65	Extension for reply within first month				
Grange fee(s) indicated below, except for the filling fee to the above-identified deposit account.	115	400	216	200	Extension for reply within second				
FEE CALCULATION	],17	920	217	460	month  Extension for reply within third month				
1. BASIC FILING FEE	118	1,440	218	720	Extension for reply within fourth				
Large Entity Small Entity	1	-			month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Pald	128 119	1,960 320	228 219	980 160	Extension for reply within fifth month  Notice of Appeal				
Code (\$) Code (\$) Fee Palls  101 740 201 370 Utility filing fee	120	320	220	160	Filing a brief in support of an appeal				
106 330 206 165 Design filing fee	127	280	221	140	Request for oral hearing				
107 510 207 255 Plant filing fee	138	1,510	158	1,510	Petition to Institute a public use proceeding				
108 740 208 370 Reissue filing fee	140	110	240	55	Petition to revive - unavoidable				
114 160 214 80 Provisional filling fee	141	1,280	241	640	Petition to revive - unintentional				
SUBTOTAL (1) (S) 0	142	1,280	242	640	Utility (saue fee (or reissue)				
2. EXTRA CLAIM FEES	143	490	243	230	Design issue fee	$\vdash$			
Extre Fee from Fee	144	620 130	244 122	310 130	Plant Issue fee Petitions to the Commissioner	$\vdash$			
Ctalms   Delow   Paid   Total Ctalms   Selow   Paid   Total Ctalms   Total Ctalms   Total Ctalms   Total Ctalms   Delow   Paid   Total Ctalms   Total Cta	123	50	123	50	Processing fee under 37 CFR 1.17 (q)	<del>                                     </del>			
Independent	126	180	126	180	Submission of Information Disclosure				
Claims 1 _9 = 0 X 84 = 0	120	160	120	100	Strat				
Multiple X = 0	581	40	581	40	Recording each patent assignment per property (times number of properties)				
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee	146	740	246	370	Filling a submission efter final rejection (37 CFR § 1.129(a))				
Code (\$) Code (\$) Fee Description	149	740	249	370	For each additional invention to be				
103 18 203 9 Claims in excess of 20	1				examined (37 CFR § 1.129(b))				
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Muttiple dependent claim, if not paid	179	740	279	370	Request for Continued Examination (RCE)				
Reissue independent claims over	169	900	169	900	Request for expedited examination				
109 84 209 42 original patent  Reissue claims in excess of 20 and					of a design application				
110 18 210 9 Reissue claims in excess of 20 and over original patent						$\vdash \vdash$			
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**or number occulously paid if greater* For Relsaues, see above	Red	iced by B	asic Fili	ng Fee P	aid SUBTOTAL (3) (5) O				

SUBWITTED BY Complete (if applicable)							
Name (Print/Type)	Kriatin L. Johnson	Registration No. Attorney/Agent)	44,807	Telephone	404-815-6389		
Signeture Curre		Dale	February 27, 2003				

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